

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) L0562.70048US00
<p style="text-align: center;">In re Application of Michael E. Caporali</p>		
<p>Application Number 10/718,362-Conf. #9518</p> <p>For FLAT MAIL VERTICAL STACKING AID</p>		<p>Filed November 20, 2003</p>
<p>Art Unit 3653</p>		<p>Examiner M. Hageman</p>
<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p>		
<p>The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$ 500.00</p>		
<p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____</p>		
<p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p>		
<p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>		
<p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p>		
<p><input type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 23/2825. I have enclosed a duplicate copy of this sheet.</p>		
<p><input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p>		
<p>I am the</p>		
<p><input type="checkbox"/> applicant /inventor.</p>		
<p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</p>		
<p><input checked="" type="checkbox"/> attorney or agent of record. Registration number 54,986</p>		
<p><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____</p>		
<p style="text-align: right;"><i>Melissa Beede</i> Signature</p>		
<p style="text-align: right;">Melissa A. Beede Typed or printed name</p>		
<p style="text-align: right;">(617) 646-8000 Telephone number</p>		
<p style="text-align: right;">September 21, 2007 Date</p>		
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>		
<p><input type="checkbox"/> *Total of 1 forms are submitted.</p>		

<p>I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p>	
<p>Dated: 9/21/07 Signature: <i>Janet D'Annunzio-Ellis</i> (Janet D'Annunzio-Ellis)</p>	